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EDITORIALS†

PLATFORM OF THE AMERICAN MEDICAL ASSOCIATION

Principles Embody the Considered Action of the American Medical Association House of Delegates.—The first editorial in the last two issues of the OFFICIAL JOURNAL had the caption, "Platform of the American Medical Association"; the December number carrying, in addition, on page 394, some explanatory comment on each of the eight principles contained therein.

Attention is again called to the origin of the set of principles of organized medicine, as expressed by our national organization: in the first instance, and at various times for the respective articles, by the House of Delegates of the American Medical Association; and subsequently, in November last, at the annual conference of secretaries and editors of state medical associations, through pronouncement by the Board of Trustees of the American Medical Association.

It is a tribute to the good judgment of those representatives of scientific and organized medicine who have made up the membership of the American Medical Association House of Delegates in succeeding years that their reactions to the medical needs of the people of the different states of the Union were so well conceived; that, when the principles that had been espoused were placed in a code form, they should excite almost general approval. True, here and there, and in our own State, from one or two of the lay proponents long associated with almost partisan espousal of a compulsory health system, an attempt has been made to point out defects in the American Medical Association platform. Criticisms from those sources, however, members of the medical profession of California, through experience in days gone by, have learned to appraise at proper value.

* * *

Secretary of Public Health in the President's Cabinet.—The medical profession of California is justified in taking a special pride in Principle 1 of the platform, namely,

1. The establishment of an agency of Federal Government under which shall be coordinated and administered all medical and health functions of the Federal Government, exclusive of those of the Army and Navy,

† Editorials on subjects of scientific and clinical interest, contributed by members of the California Medical Association, are printed in the Editorial Comment column which follows.

and this because of the prominent part taken by Dr. Thomas M. Logan of California, president of the American Medical Association in 1874, who at that time and prior thereto (as outlined in the article on page 6 of the January issue of CALIFORNIA AND WESTERN MEDICINE) may be said to have been, in all probability, the foremost protagonist in the effort of American medicine to bring that principle into being.

Almost three-quarters of a century have intervened since Doctor Logan thus challenged attention, and the people of the United States are still waiting for the establishment of this much-needed agency in our Federal Government. In the meantime, material interests of the nation have been given full recognition, even though vital needs have been forced to wait. Perhaps, however, out of the social unrest of our present period will finally come the institution of a secretary of public health in the cabinet of the President of the United States!

Under such a coördinated administration of all medical and health functions of the Federal Government, it should be possible to initiate measures of sane and practical nature through which procedures could be inaugurated, designed to remedy whatever deficiencies may exist in the adequacy of medical care to all our people.

* * *

American Medical Association Platform Worthy of Study by All Physicians.—Members who have not yet read the platform of the American Medical Association (which is also the platform of each of the constituent state medical associations) should put aside their December issue of the OFFICIAL JOURNAL, with promise to themselves to peruse the American Medical Association principles and the comments thereon, as given on page 394 of that number.

It is important, in troublous times such as the present, that we should move forward with united front. Clear understanding and whole-hearted espousal of the principles outlined in the American Medical Association platform will permit us to do so.

PRESIDENT ROOSEVELT'S HOSPITALIZATION PROPOSALS

Recent Announcement by President Franklin D. Roosevelt.—On December 22 last, at his usual press conference, President Roosevelt gave an outline of proposed aid to poorer communities in the United States, in which, in the opinion of competent local medical and other authorities, a real need for hospital facilities exists. The Chief Executive of the Nation stressed the point that his proposals were not to be of the same nature as ordinary "grants-in-aid"—that is, for the matching of federal with state funds—but comprehended, rather, a direct allocation of federal moneys to permit the erection of modest hospital units, title to which, however, would remain in the Federal Government, with maintenance to be cared for by local communities. Reason for this: the wealthier states have ample means to provide all necessary

hospital facilities for their citizens; whereas, in some of the poorer states, in which hospitals were presumably inadequate, the need of certain support from the nation's treasury seems indicated. This again, on the ground that all states are part of the Union, and that it is the obligation of the Federal Government to help those commonwealths not having resources and means necessary to provide for themselves.

* * *

Significance of the Announcement.—Significant also were several other things brought out at this press conference: (1) That President Roosevelt felt the Wagner Health Bill program for 80 million dollars in the first year, and almost one billion dollars in ten years, is not warranted under existing conditions; (2) that his proposals for the erection of hospitals contemplate an initial appropriation by the present Congress of about 10 million dollars, on the supposition that a single one-story hospital unit can be built for about \$150,000; and (3) that this is the first conference at which official representatives of the American Medical Association have been invited in joint audience with the Chief Executive to discuss medical needs of the country!

This change of front on the part of legislative and executive authorities at the nation's capitol is welcome news to the medical profession of the United States, whose members have not forgotten that some of the Washington governmental activities in relation to medical service and public health activities have been anything but pleasing or in line with proven methods for the maintenance of the quality and adequacy of medical service.

* * *

Proposed Plan More in Harmony With the American Medical Association Platform.—The suggested program is in line with tenets laid down in the recently promulgated American Medical Association platform, in which is implied the greater value of judgments secured from competent local sources than that which could be expected or obtained from far-distant, swivel-chair opinion in the District of Columbia. By and large, the people of the United States still believe in the value of local option and authority in the handling of community problems, both for the states and their constitutional county units, of which the commonwealths are composed.

* * *

Weakness of Political Bureaus.—Whether it is wise for the Washington Government to retain title in the hospital properties, thus laying the foundation of another bureau that would assume a certain amount of supervision or overlordship of such institutions (with prospects of extension in size, number, and scope of the federal agency involved, as usually comes to pass in all political bureaus), may be a question. The query can also be expressed, Why could not the money be loaned to the local communities, in a manner similar to loans to citizens who build homes with federal